

HOUSE BILL NO. 568

INTRODUCED BY E. LIESER, Z. BROWN, M. FUNK, C. LARSEN, E. MCCLAFFERTY, C. POPE, B. SMITH

A BILL FOR AN ACT ENTITLED: "AN ACT REQUIRING CERTAIN LICENSED PROFESSIONALS TO PARTICIPATE IN SUICIDALITY ASSESSMENT, TREATMENT, AND MANAGEMENT TRAINING; ESTABLISHING CRITERIA FOR APPROVED TRAINING PROGRAMS; REQUIRING THE DEPARTMENT OF LABOR AND INDUSTRY AND CERTAIN PROFESSIONAL BOARDS TO DEVELOP A MODEL LIST OF TRAINING PROGRAMS; REQUIRING THE MODEL LIST TO BE UPDATED EVERY 2 YEARS; PROVIDING DEADLINES FOR THE CREATION OF THE MODEL LIST AND PARTICIPATION IN THE FIRST REQUIRED TRAINING; AND PROVIDING AN IMMEDIATE EFFECTIVE DATE AND A TERMINATION DATE."

WHEREAS, Montana consistently has one of the highest suicide rates in the nation; and

WHEREAS, according to the centers for disease control, between 2002 and 2011 in Montana, suicide was the number two cause of death for children ages 10 to 14, adolescents ages 15 to 24, and adults ages 25 to 44, behind only unintentional injuries; and

WHEREAS, Montana military veterans have a high risk of suicide, and according to the Montana department of public health and human services' office of epidemiology and scientific support, between 2004 and 2013, there were 566 suicides by Montana veterans of all ages, giving Montana veterans an estimated rate of 54 suicides per 100,000 veterans; and

WHEREAS, Montana has the highest rate of suicide among the American Indian population, with a rate of 26.4 suicides per 100,000 in 2012-2013, while they constitute 6% of the population overall; and

WHEREAS, community primary care and mental health providers are a vital resource to help Montanans at risk of suicide and therefore must be trained in the most effective prevention and intervention methods.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

NEW SECTION. Section 1. Suicidality assessment, treatment, and management training. (1) The following licensees are required to complete suicidality assessment, treatment, and management training under the provisions of this section:

(a) a physician licensed under Title 37, chapter 3;

- (b) a registered nurse, a licensed practical nurse, or any other nurse licensed under Title 37, chapter 8;
- (c) a chiropractor licensed under Title 37, chapter 12;
- (d) a psychologist licensed under Title 37, chapter 17;
- (e) a physician assistant licensed under Title 37, chapter 20;
- (f) a social worker licensed under Title 37, chapter 22;
- (g) a clinical professional counselor licensed under Title 37, chapter 23;
- (h) an occupational therapist licensed under Title 37, chapter 24;
- (i) a naturopathic physician licensed under Title 37, chapter 26;
- (j) an addiction counselor licensed under Title 37, chapter 35; and
- (k) a marriage and family therapist licensed under Title 37, chapter 37.

(2) A licensee listed in subsection (1) must complete at least 6 hours of suicidality assessment, treatment, and management training in each 5-year period that the licensee holds a license in good standing.

(3) (a) Except as provided in subsections (3)(b) and (3)(c), training in suicidality assessment, treatment, and management that satisfies the requirements of this section must contain the following elements:

- (i) suicidality assessment, including screening and referral;
- (ii) suicidality treatment; and
- (iii) suicidality management.

(b) A board that oversees a licensee listed in subsection (1) may approve training that includes only screening and referral elements if it is appropriate for that profession based on the profession's scope of practice.

(c) The board of occupational therapy may approve training that includes only screening and referral elements if it is appropriate for occupational therapy practitioners based on the practice setting.

(4) The hours spent completing training in suicidality assessment, treatment, and management must be counted toward meeting any applicable continuing education or continuing competency requirements for each profession.

(5) (a) The department shall assist the boards that oversee each of the licensees listed in subsection (1) to develop a model list of training programs in suicidality assessment, treatment, and management. When developing the model list, the department and the boards shall:

- (i) consider suicidality assessment, treatment, and management training programs of at least 6 hours in length that are listed on the best practices registries of the American foundation for suicide prevention and the suicide prevention resource center;

(ii) consult with public and private institutions of higher education, experts in suicidality assessment, treatment, and management, and affected professional associations.

(b) The department and the boards shall update the model list at least once every 2 years. The department and the boards shall include on the model list, to the extent practicable, training that includes content specific to veterans. When identifying training with veteran-specific content, the department and the boards shall consult with the United States department of veterans affairs.

(6) (a) The department and the boards shall develop the initial model list of training programs by December 31, 2015.

(b) A licensee listed in subsection (1) shall complete the first required 6 hours of suicidality assessment, treatment, and management training by June 30, 2017.

NEW SECTION. Section 2. Codification instruction. [Section 1] is intended to be codified as an integral part of Title 37, chapter 1, part 3, and the provisions of Title 37, chapter 1, part 3, apply to [section 1].

NEW SECTION. Section 3. Effective date. [This act] is effective on passage and approval.

NEW SECTION. Section 4. Termination. [Section 1(6)] terminates June 30, 2017.

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